



PATENT/DESIGN PATENT

As a below-named inventor, I(we) hereby declare that:

My residence, post office address, and citizenship are as stated below next to my name;

I verily believe I am the original, first and sole inventor (if only one name is listed below) or an original, first and joint inventor (if plural names are listed below) of the subject matter which is claimed and for which a patent is sought on the invention entitled:

COMPRESSED-MEDIUM OPERATED NIPPERS

(Insert invention title)

the specification of which is attached hereto.

I hereby state that I have reviewed and understand the contents of the above identified specification, including the claims, as amended by any amendment specifically referred to in the declaration.

I acknowledge the duty to disclose all information which is known to be material to patentability of this application in accordance with Title 37, Code of Federal Regulations § 1.56.

I hereby claim foreign priority benefits under Title 35, United States Code, §119, of any foreign application(s) for patent or inventor's certificate listed below and have also identified below any foreign application for patent or inventor's certificate having a filing date before that of the application on which priority is claimed.

(List prior foreign applications)

COUNTRY	APPLICATION NUMBER	DATE OF FILING (day, month, year)	PRIORITY CLAIMED UNDER 37 USC 119
Germany	198 18 029.2	22 / 04 / 1998	[X] YES NO[]
			[]YES NO[]
			[]YES NO[]

I hereby declare that all statements made herein of my knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under Section 1001 of Title 18 of the United States Code and that such willful false statements may jeopardize the validity of the application or any patent issued thereon.

Telephone calls and correspondence should be directed to:

VIDAS, ARRETT & STEINKRAUS Suite 2000, 6109 Blue Circle Drive, Minnetonka, Minnesota 55343-9131, USA Phone (612) 563 3000 Facsimile (612) 563 3001

Sole	or	First	: In	ven	tor
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Second Inventor

Full name: Dr. 1	KRETZSCHMAR Michael	Full name:	
signature		Inventor's signature:	
Date:	C/11/6/October, 2000	Date:	
<u>-</u>	German	Citizenship:	
Post office I	Heselstücken 18	Post office	
address I	D-22453 Hamburg	address:	
(Germany カ た 🗸		
Residence:	per	Residence	
(if different from	1	(if different from	
post office addre	ess)	post office address	

(Attach additional sheets for third and subsequent inventors)





PATENT/DESIGN PATENT

11/11-

0005 100 U.S. OFFICE IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

Inventor:	Dr.	KRETZ	SCHMAR, Michael	}	VERIFIED STATEMENT
Title:	COMPI	RESSED	-MEDIUM OPERATE	NIPPERS	CLAIMING SMALL ENTITY STATUS
Filed:		[X]	Concurrently herewith on))	
		• •	Ser. No.)	(INVENTOR FORM)
					Docket No: Holo, Q

- 1. As a below-named inventor, I hereby declare that I qualify as an independent inventor as defined in 37 CFR §1.9(c) for purposes of paying reduced fees under section 41(a) and (b) of Title 35, United States Code, to the Patent and Trademark Office with regard to the invention identified above, the docket no., filing date and application number of which application may be inserted above by any attorney of Vidas, Arrett & Steinkraus, P.A., when known.
- 2. I have not assigned, granted, conveyed or licensed and am under no obligation under contract or law to assign, grant, convey or license, any rights in the invention to any person who could not be classified as an independent inventor under 37 CFR §1.9(c) if that person had made the invention, or to any concern which would not qualify as a small business concern under 37 CFR §1.9(d) or a nonprofit organization under 37 CFR §1.9(e).
- 3. I acknowledge the duty to file, in this application for patent, notification of any change in status resulting in loss of entitlement to small entity status prior to paying, or at the time of paying, the earliest of the issue fee or any maintenance fee due after the date on which status as a small entity is no longer appropriate.
- 4. I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under Section 1001 of Title 18 of the United States Code, and that such willful false statements may jeopardize the validity of the application, any patent issuing thereon, or any patent to which this verified statement is directed.

Dated: <u>6.</u> October, 2000	Signature Dr. Kretzschmar, Michael
Dated:	SignatureInventor Name:
Dated:	Signature Inventor Name:

(Attach further sheets for additional inventor)
(Filing date, serial number and docket number may be left blank at time of signing

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PATENT/DESIGN PATENT

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

Inventor:	Dr. KRET	ZSCHMAR, Michael)) POWER OF ATTORNEY) FROM INVENTOR(S)
Title:	COMPRESSE	D-MEDIUM OPERATED NIPPER	s)) }
Filed:	[X] []	Concurrently Herewith on Ser. No	}
	ENT APPLICA		Docket No: #01.2.9509

Washington, DC 20231

As a below named inventor of the subject matter of the above identified patent application, I

hereby appoint the following attorneys to insert the docket no., filing date and application number of said application above when known; to prosecute this application and any application claiming priority therefrom; to execute any terminal disclaimers on behalf of assignee; and to transact all business in the Patent and Trademark Office connected therewith:

Oliver F. Arrett	Reg. No. 22,117
Scott Q. Vidas	Reg. No. 30,812
Walter J. Steinkraus	Reg. No. 29,592
Richard A. Arrett	Reg. No. 33,153
Leoniede M. Brennan	Reg. No. 35,832
Jane H. Arrett	Reg. No. 33,355
William E. Anderson II	Reg. No. 37,766
Jonathan Grad	Reg. No. 41,795
Robert O. Vidas	Reg. No. 20,164

all of VIDAS, ARRETT & STEINKRAUS, Professional Association, Suite 2000, 6109 Blue Circle Drive, Minnetonka, Minnesota, USA, Telephone (612) 563 3000, and I hereby authorize them to act and rely on instructions from, and to communicate directly with, the firm or person which sent this case to VIDAS, ARRETT & STEINKRAUS unless or until I instruct VIDAS, ARRETT & STEINKRAUS in writing to the contrary.

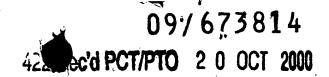
_ day of October 2000 (First inventor's signature) (First inventor's name) Dr. Kretzschmar, Michael (Second inventor's signature) (Second inventor's name) (Third inventor's signature) (Third inventor's name)

> Attach additional sheet with name(s) and signature(s) of fourth and subsequent inventors) (Filing date, serial number and docket number may be left blank at time of signing)

> > **VIDAS, ARRETT & STEINKRAUS**

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PATENT

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE UNITED STATES RECEIVING OFFICE (RO/US)

In re Application of:

Michael Kretzschmar

U.S. Nat'l Stage of

PCT/EP99/02269

Int'l App. No.:

Int'l Filing Date:

1 April 1999

For:

COMPRESSED MEDIUM OPERATED

NIPPERS

Box PCT

ATTN: EO/US

Assistant Commissioner for Patents

Washington, D.C. 20231

Docket No.: H01.2-9509

CORRESPONDENCE ADDRESS OF LAW FIRM

Vidas, Arrett & Steinkraus P.A. would like to make the following correspondence address of record. Please send all correspondence for this application to the address as follows:

CUSTOMER NUMBER 490

whose present address is Vidas, Arrett & Steinkraus P.A. **Suite 2000** 6109 Blue Circle Drive Minnetonka, MN 55343-9131

Respectfully submitted,

VIDAS, ARRETT & STEINKRAUS

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